

## Curriculum:

### Student contact details

First name/Last name:

Full address (street, city):

Mobile phone:

Email:

Student no:

## Internship thesis/report

Company/Institution:

Website:

Full address (street, city):

Phone:

Email:

Person in charge (Tutor):

Department:

### Start date:

### End date:

Employment rate (in %):

1st job experience in the company/institution:

Short description of the internship (max. 4 lines): **full job description attached:**

## Research thesis

Short description of the research topic (max. 4 lines):

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### Important notes:

- 1) No internship can be carried out during the first semester of the programme or before validation of minimum 30 ECTS.  
Other reglementary restrictions may apply depending on the curriculum.
- 2) It is the student's responsibility to ensure with his/her tutor in the company/institution that the internship doesn't negatively affect other course work.
- 3) By signing, the student confirms meeting the requirements for carrying out an internship according to the applicable study regulations.

Student signature:

Date:

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Below section to be completed by the University - Please leave blank

**Approved on:**

**Academic supervisor (full name):**

**For the programme:**